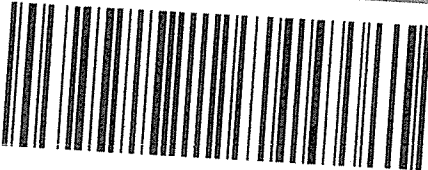


7021 2720 0001 3619 1934

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



7021 2720 0001 3619 1934
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PS Form	City, State	Street Address	Sent To	Total Postage	Postage	Adults	Confir	Return	Extra Ser	Certified	For	Dom	U.S. CE

Steven Robert Brown
211 Grant Avenue, Room 203-A
Morgantown, WV 26505

See Reverse for Instructions

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